

Read this form carefully. The judge will ask you if you understand each right, and if you are voluntarily giving up that right.

1. Petition

- a. ☐ I have read the petition and I understand it.
- b. ☐ The petition has been read to me and I understand it.
- Right to an Attorney** You have the right to be represented by an attorney and one will be appointed for you if you cannot afford one, subject to a claim by the county for payment.
- a. ☐ I give up my right to be represented by an attorney.
- b. ☐ I request the court to appoint an attorney for me.
- I wish to
- a. ☐ admit the allegations of the petition.
- b. ☐ submit the petition on the basis of the social worker's report and other documents, if any.
- c. ☐ plead no contest.

4. By admitting the petition, submitting the petition on the report, or pleading no contest, I am giving up the following rights:

- The right to a trial or hearing.
- The right to see and hear witnesses who testify.
- The right to cross-examine witnesses, the social worker who prepared the report, and the persons whose statements are contained in the report.
- The right to testify in my own behalf and to present my own evidence and witnesses.
- The right to use the authority of the court to compel witnesses to come to court and to produce evidence.
- Any privilege against self-incrimination in this proceeding.

5. Consequences

- a. I understand that if I plead no contest or submit the matter on the report, the court will probably find that the petition is true.
- b. I understand that if the petition is found to be true and the child is declared a dependent of the court, the court may assume custody of the child, and under certain circumstances, it is possible that no reunification services will be offered or provided.
- c. (*Child under three at time of initial removal*) For a child under three at the time of initial removal, I understand that if the court assumes custody of the child, and I fail to participate regularly in court-ordered treatment, at the review in six months, services may be terminated, and the court may make a permanent plan for the child, which could result in termination of parental rights and placement of the child for adoption. A maximum of 12 months of reunification services may be provided.

Initial

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(Continued on reverse)

CHILD'S NAME: _____	CASE NUMBER: _____
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5. d. *(Child three or older at time of initial removal)* For a child three or older at the time of initial removal, I understand that if the court assumes custody of the child, and the child cannot be returned within one year, or at the most 18 months from the time the child was taken into physical custody, the court will make a permanent plan for the child, which could result in termination of parental rights and placement of the child for adoption. _____

Date:

.....
(TYPE OR PRINT NAME) ▶ _____
(SIGNATURE OF PARENT OR GUARDIAN)

Declaration of Translation

6. The primary language of the ☐ parent ☐ guardian is
☐ Spanish.
☐ other (*specify*):

I certify that I translated this form to the parent or guardian in that person's primary language.

Date:

.....
(TYPE OR PRINT NAME) ▶ _____
(SIGNATURE OF TRANSLATOR)

Declaration of Attorney

7. I am the attorney for the ☐ parent ☐ guardian.
 I have explained and discussed with my client the rights and consequences of
☐ admitting the petition.
☐ pleading no contest.
☐ submitting the petition on the report.

Date:

.....
(TYPE OR PRINT NAME) ▶ _____
(SIGNATURE OF ATTORNEY)